

DENTAL STATUS IN ADOLESCENTS WITH MIXED BEHAVIORS AND EMOTIONS OF ADOLESCENCE

Hural N.V., Lisetska I.S.

*Ivano-Frankivsk National Medical University,
Department of Child Dentistry, Ivano-Frankivsk*

Ключевые слова: стоматологический статус, смешанные расстройства поведения и эмоций подросткового возраста.

Резюме: уровень соматической заболеваемости детей в Украине и мире постоянно растет. Психологическое и психическое благополучие ребенка может влиять на соблюдение ею рекомендаций об обеспечении оптимального состояния здоровья полости рта. Поэтому целью нашего исследования стало изучение стоматологического статуса у подростков со смешанными расстройствами поведения и эмоций подросткового возраста.

Resume: the rate of somatic morbidity in children in Ukraine and in the world is constantly increasing. The psychological and mental well-being of a child has a significant impact on adherence to its recommendations for optimal oral health. Therefore, the purpose of our study was to examine the dental status of adolescents with mixed disorders and adolescent emotions.

Topicality. The level of somatic morbidity in children in Ukraine and in the world is constantly increasing, dental caries and chronic catarrhal gingivitis remain a significant problem in pediatric dentistry. There is no doubt that the human body is a holistic system, therefore, there is undoubtedly a correlation between pathological conditions of the oral cavity and diseases of the internal organs and systems [4, 6]. Today, the diseases of the nervous system take the last place. Over the past decade and a half, the level of psychoneurological pathology has increased by 56.8% among children and by 90.9% among adolescents. In the structure of mental illness, behavioral disorders account for 54.3% of children and 28.5% of adolescents. Mental disorders as a cause of disability in children are third after diseases of sensory organs, infectious and parasitic diseases [5, 6].

Numerous studies show that the condition of the oral cavity in children and adolescents correlate with numerous biological, physiological and social factors, from living in a certain region, characterized by the peculiarities of the mineral composition of drinking water, the predominance of nutrition and the specific influence of local biogeocene, the level of general education of their parents, the availability of dental care to the population, the implementation of prevention measures to maintain dental health [1, 2].

The psychological and mental well-being of a child has a significant impact on adherence to its recommendations for the optimal health of the oral cavity (teeth cleaning, rinsing, rejection of excessive sweets, carbonated beverages and other foods that can harm the child's dental health due to destruction of enamel, disturbance of remineralization processes, creation of nutrient medium for active bacterial reproduction) [1, 3].

Therefore, **the purpose of our study** was to examine the dental status of adolescents with mixed disorders and adolescent emotions.

Materials and methods of research. In order to achieve this goal, with the informed consent of parents in compliance with the principles of bioethics, we examined 67 adolescents aged 12 to 18 years. We divided all the surveyed into two groups. Group I (core group)

included 67 adolescents with mixed disorders and adolescent emotions; in group II (comparison group) - 30 adolescents who at the time of the survey did not complain and were not monitored in the clinic by narrow specialists. Dental status was determined using the following methods: calculation of the index cp+CPV, CPV - to assess the intensity of caries of temporary and permanent teeth; PMA (papillary-marginal-alveolar) index to assess the inflammatory process of the gums; Green-Vermillion Hygienic Index to evaluate oral hygiene.

Results of the survey and their discussion. In the adolescents of the main group according to the clinical examination and calculation of the index cp+CPV, CPV average intensity of caries intensity of temporary and permanent teeth was $5,78 \pm 0,05$; corresponding to the high intensity of caries, with an acute course of the pathological process. In the adolescents of the comparison group according to the clinical examination and calculation of the index cp+CPV, CPV average intensity of caries intensity of temporary and permanent teeth was $4,12 \pm 0,03$; corresponding to the high intensity of caries, and the chronic course of the pathological process prevailed.

In the adolescents of the main group according to the clinical examination and the calculation of the Green-Vermillion Hygiene Index, the average hygiene index was $1,96 \pm 0,02$ points, which corresponds to poor oral hygiene. In the adolescents of the comparison group according to the clinical examination and the calculation of the hygiene index Green-Vermillion average level of hygiene index was $0,88 \pm 0,01$ points, which corresponds to satisfactory oral hygiene.

In the adolescents of the main group according to clinical examination and calculation of PMA index, the average intensity of the inflammatory process of the gums was $42,3 \pm 0,13$ %, which corresponds to the average degree of gingivitis. In the adolescents of the comparison group according to the clinical examination and the PMA index, the average intensity of the inflammatory process of the gums was $23,6 \pm 0,18$ %, which corresponds to a mild degree of inflammation.

Conclusions. The analysis of the obtained results indicates a significantly higher intensity of caries process in adolescents with mixed disorders of behavior and emotions of adolescence. In addition, this group of adolescents is dominated by unsatisfactory oral health and moderate severity of gingivitis, as opposed to somatically healthy adolescents who have a satisfactory oral hygiene status and mild gingivitis. A study of the impact of adolescent mental health on dental status is necessary to further develop a program of treatment and prevention in this adolescent group.

References

1. Dats V.V. Features of dental status in children with different levels of mental health / V.V. Dac // Modern dentistry. - 2019. - №2. - P. 46-49.
2. Fakroon S. et al. Dental caries experience and periodontal treatment needs of children with autistic spectrum disorder / Fakroon S., Arheiam A., Omar S. // European Archives of Pediatric Dentistry. - 2015. - №16 (2). - P. 205-209.
3. Manoharan S., Krishnamoorthy K. Dental Caries and Children with Attention Deficit Hyperactivity Disorder (ADHD) - A Review. Journal of Pharmaceutical Sciences and Research. - 2016. - 8 (7). - P. 613.
4. Godovanets O.I. et al. Comorbidity of dental and somatic pathology in children / O.I. Godovanets, Y.O. Pavlov, L.G. Grinevich, O.O. Vitkovsky // The Galician Medical Bulletin. - 2018. - Vol. 25, No.2. - P. 4-6.

5. Gulenko O.V. et al. Structural and functional analysis of dental status in children with mental retardation / O.V. Gulenko, V.V. Volobuyev, I.K. Sevastyanova, N.I. Bykova, E.A. Faraponova, S.B. Khagurov // *Kuban Scientific Medical Journal*. - 2013. - №6 (141). - P. 81-85.

6. Skripnik Y.V. et al. Development of an algorithm for prevention of major dental diseases in children with mental retardation / Y.V. Skripnik, T.O. Buchinskaya, I.I. Yakubova // *News of dentistry*. - 2016. - №1 (86). - P. 68-72.

РЕПОЗИТОРИЙ БГМУ